## Appendix B Annotated History of Public Health in Texas

Texas Department	of Health Comprehensive Strategic and Operational Plan Fiscal Years 2001–2002

## AN ANNOTATED TIMELINE OF TEXAS PUBLIC HEALTH HIGHLIGHTS

1825	Vital registration requirements were the first attempts at government regulation of public health in the area that would later become the State of Texas.					
1828-1832	The town council of San Felipe began regulation and promotion of hospitals, public sanitation, and apothecary shops and began the licensure of physicians. A Board of Health was established for the town and vital registration was initiated.					
1837	A Board of Medical Censors was created.					
1839-1867	Yellow Fever epidemics plagued the residents of the new state.					
1840	The Austin city government established statutes for hospital and food inspection.					
1846	A cholera epidemic occurred in Indianola.					
1850	The first official quarantine regulations were established in Galveston as a result of Yellow Fever epidemics.					
1852	The city of San Antonio passed hospital and food inspection regulations					
1856	The State Legislature passed quarantine statutes.					
1879	Dr. Robert Rutherford (1879-1881) was appointed as the first State Health Officer. His primary responsibilities involved identifying epidemics and the need for quarantines.					
1883	State pure foods statutes were passed but were later declared unenforceable.					
1890	The first maritime quarantine system was established in Texas.					

The Texas Quarantine Department was established with ten staff members and two branches: a Quarantine Branch and an Internal Sanitation Branch.

Laws were passed allowing the appointment of city and county physicians.

The Quarantine Department was renamed the Department of Public Health and Vital Statistics but was given no given additional appropriation. It allowed for appointment of a chemist for food and medicine analysis and created the Bureau of Vital Statistics.

The Pasteur Institute, the first public health laboratory, was begun as part of Austin State Hospital (then known as Austin Lunatic Asylum) with the focus on rabies prophylactic treatment.

- 1906 The Federal Food and Drug Act was passed. The public was becoming increasingly aware of the need for food safety and public sanitation.
- 1907 A Dairy and Food Commissioner position was created and located in Denton, and was given the responsibility of enforcing new food laws.
- 1908 The Department of Public Health and Vital Statistics was abolished and was replaced with the Texas State Board of Health; the Board had seven members.
  - The State Health Officer was the Board President and was appointed by the governor.
  - The Registrar of Vital Statistics position was created.
  - The State Health Officer prepared "A Proposed Uniform Municipal Sanitary Code for Texas Cities and Towns" and "Duties of County Health Officers."
  - Texas Anti-Tuberculosis Association formed as a

quasi-official branch of the Board and the Texas Sanatorium for the Treatment of Tuberculosis was opened under the Association's direction.

- 1909 A state Sanitary Code was adopted and provided for:
  - Mandatory reporting of all contagious diseases,
  - Reports of TB to be keep confidential, and
  - Definition of isolation and quarantine rules.
- 1910 An Anti-Tuberculosis commission was established and chaired by the State Health Officer.
- 1911 A Hookworm Commission was created.

The Texas Sanatorium for the Treatment of Pulmonary Tuberculosis was opened; the Anti-Tuberculosis Commission became the Board of Commissioners of the Sanatorium.

- 1912 A bacteriological laboratory was established under the State Board of Health.
- New legislation required the Health Department to disseminate information about communicable diseases in English, Spanish, and German. Also required were exhibits displayed in the cities and towns along railway lines.

An Anti-Plague Commission was created.

The State Health Department added a Sanitary Inspector position.

An Anthrax Commission was added to the State Board of Health (it ended in 1916).

1916 Director of Rural Sanitation was appointed.

Bureau of Venereal Disease was established.

The Bureau of Sanitary Engineering was established under the State Board of Health.

1918	<ul> <li>The name of the department was changed to Texas State Health Department.</li> <li>The Legislature recommended the combining of the Commission of Dairy and Food with the Texas State Health Department and creating a Bureau of Dairy and Food within the department.</li> <li>The Legislature authorized \$45,000 to aid the department in devoting "all of its energies to rural health work in all parts of the State." Five field units were established.</li> <li>Rural Sanitation was now called the Bureau of Rural Sanitation and Intensive Health Work.</li> </ul>				
1919	The first full time county health work was begun.				
1921	The responsibilities of the Dairy and Food Commission were moved to the State Board of Health.				
1922	The Bureau of Child Hygiene was established; staff included a maternity home inspector and seven public health nurses augmented by 58 nurses from the American Red Cross.  The Bureau of Communicable Diseases was created with the				
	primary functions of promoting educational activities and the regulation of beauty parlors and barbershops.				
1923	The staff of the Health Department included a Secretary of Public Health Education.				
1924	The Bureau of Child Hygiene was responsible for a survey of midwives; a doctor and public health nurse provided by the American Child Health Association assisted in the survey.				
	The Bureau of Rural Sanitation and Intensive Health Work was again renamed the Bureau of Rural Sanitation and was responsible for county health work.				
	Bureau of Venereal Disease was placed under Bureau of Communicable Disease and this burea began epidemiological studies.				



- 1925 The Bureau of Sanitary Engineering changed its name to Bureau of Water Waste Control and Inspection; its responsibilities included:
  - Analysis of water supplies
  - Inspection of purification plants
  - Advice and supervision in construction and maintenance of public water supplies and sewage systems
  - Inspecting food and slaughter houses
  - Enforcing milk laws
  - Oyster regulations.

The Bureau of Child Hygiene was responsible for:

- Public health education and
- Licensing of lying-in hospitals and orphanages.

The Bureau of Rural Sanitation was replaced by the Bureau of City and County Health Officers.

The Bureau of Communicable Diseases continued its work, primarily in the areas of venereal disease and tuberculosis.

The Board of Health appointed a Chief Health Officer.

The Bureau of Water Waste Control and Inspection changed its name to the Bureau of Sanitary Engineering and was mainly responsible for rural sanitation.

The Bureau of Public Health Education was established.

The Pasteur Lab, the Pure Food Commission lab, and the Health Department's bacteriological lab were combined to form the Bureau of Laboratories.

The Board of Health was comprised of nine members: six physicians, one dentist, one pharmacist, and one engineer.

- The Bureau of Rural Health Administration was formed.
- The physical restoration service for crippled children under age 21 was placed in the State Department of Education.

1934	The Bureau of Rural Health Administration became the Health Unit Service.				
1935	The Bureau of Child Hygiene became the Division of Matern and Child Health				
	The Bureau of Communicable Diseases became the Bureau of Communicable Disease Control and Epidemiology.				
	The Division of Community Sanitation and Malaria Control organized and included an Assistant State Director and 20 District Supervisors; assisted by the WPA, their responsibilities included oversight of swamp drainage, lining of ditches with concrete, and (during WWII) spraying of mosquito breeding grounds with DDT.				
1936	The Division of Venereal Disease Control was organized.				
	The Division of Dental Health was established under Maternal and Child Health Bureau.				
	The Division of Industrial Hygiene was created.				
1937	The Health Unit Service became the Local Health Service.				
1938	The Bureau of Communicable Disease Control and Epidemiology became the Division of Epidemiology.				
1939	The Bedding Division was created as part of the Bureau of Sanitary Engineering.				
1942	The Division of Industrial Hygiene became the Division of Sanitary Engineering; it was concerned with air pollution radiation, and civil defense against chemical and radiation hazards.				
	The three member Merit System Council:				

The three member Merit System Council:

 developed policies and practices for the personnel office,



- maintained personnel records and classification schedules, and
- approved personnel changes.
- The Division of Dental Health separated from Maternal and Child Health Bureau; its functions were: education, clinical service for under-privileged, and research.

Crippled children's services were transferred from the Department of Education to the Health Department, creating the Crippled Children's Division. It received federal funds from Title V of the Social Security Act.

The Hospital Survey and Construction Division was created.

The Division of Sanitary Engineering was decentralized.

- 1947 The Cancer Control Division was formed to:
  - educate physicians,
  - provide free tissue diagnosis for the medically indigent,
  - oversee cancer diagnostic and treatment clinics, and
  - keep cancer morbidity and mortality statistics.
- The Division of Mental Health was created for the purposes of:
  - promotion of good mental health,
  - prevention of ill mental health,
  - training of professional personnel, and
  - provision of clinical services through provision of financial support to clinics.
- 1954 The State Health Officer's title was changed to Commissioner of Health.

The Division of Cancer Control included a program for control of heart disease.

1955 The Division of Hospital Services was created to oversee hospital construction, nursing home licensure, and emergency ambulance permits.

The Industrial Hygiene Section became the Division of Occupational Health and the Division of Sanitary Engineering was reactivated as part of new division, the Bureau of Sanitary Engineering, which included:

- The Division of Sanitary Engineering and
- The Water Pollution Control Division.

The Division of Emergency Medical Services was established to manage the acquisition and use of civil defense hospitals and the development of disaster survival plans.

The Division of Training and the Personnel Office were established (the Division of Training ended in 1958 due to lack of funding).

1957 The Chronic Disease Program was initiated; its concerns were:

- nursing and convalescent home inspections and standards,
- local health department educational materials, diabetes screening, and
- rehabilitation nursing services.

The Legal Counsel Office was created.

The Merit System Council became independent of the State Health Department.



1959	The Hospital Licensing Law was passed.					
1960	The Division of Occupational Health became the Division of Occupational Health and Radiation Control.					
	The Water Pollution Control Board was created as separate agency and absorbed the Water Pollution Control Division.					
1961	The Hospital Licensure Division was created to manage the inspection and licensing of hospitals.					
1962	The Emergency Medical Services was renamed Disaster Health and Medical Services.					
1963	The Office of Deputy Commissioner was created.					
	The Governor appointed a Committee on the Eradication of Tuberculosis in Texas.					
1964	The Mental Health Division transferred to the Board for Texas State Hospitals and Special Schools.					
1965	A Vector Control Division was authorized.  The Division of Tuberculosis Control formed following consolidation of TB responsibilities to the State Health Department and four TB hospitals transferred to the department.					
	The Medical Care Administrative Services Section was created to administer Medicare and included the Division of Certification and Consultation (administration of Title XVIII) and The Division of Home Health Services.					

The Family Planning Program was authorized.

Newborn screening for PKU began.



The Deputy Commissioner of Environmental Health position was created.

Responsibility of licensing private mental hospitals was transferred to MHMR. Under interagency contract, the State Health Department still conducted inspections; the Department of Health must approve all State TB hospitals, mental hospitals, and schools for the retarded.

The Department of Health was reorganized and three new positions were formed:

- Deputy Commissioner for Finance,
- Deputy Commissioner for Tuberculosis, and
- Deputy Commissioner for Program Planning.

The Disaster Health and Medical Services was renamed the Civil Defense and Traffic Safety Division and was given the responsibility for emergency medical resource planning, local emergency medical service improvement, ambulance services, and emergency medical communications.

Vector control activities were curtailed due to budget cuts.

Activities of the Division of Water Pollution Control were transferred to the Division of Wastewater Technology and Surveillance; these included planning and specification review and field activities.

The Division of Marine Resources was created for the purpose of certification of shell fish plants, licensing of crab plants, sampling of bay waters, and monitoring of producing areas.

The Office of Program Planning was established and was responsible for coordination of department plans for the



Governor and coordination between programs and the department's fiscal section.

The Veterinary Public Health Division was given responsibility for all meat and poultry inspection.

An interagency contract was made with the State Department of Public Welfare to survey long-term care facilities.

1970 The Deputy Commissioner of Air Pollution Control position was created.

The Civil Defense and Traffic Safety Division was formed and included the Medical Advisory Board for driver's licensing.

The Vector Control Division was re-budgeted with expanded duties.

Local Public Health Regions were organized; Region 7 (Tyler) was activated as a pilot; Regions 4 and 9 were funded; a total of 10 regions were planned.

The Nutrition Services Division was activated.

1971 The responsibilities of Chest Hospitals were expanded to include treatment of persons with various respiratory diseases.

1972 The Nutrition Services Division became part of the Office of Program Planning for regional services.

The Department of Health negotiated a contract with the Department of Welfare to provide EPSDT medical and dental screens to children under six.



Regions 3 (El Paso) and 10 (Harlingen) were activated

1973 EPSDT expanded to include children under age 21.

Air Pollution Control moved from the Health Department to become separate agency.

The Kidney Health Care program was created.

The WIC Program was authorized.

The Cervical Cancer Screening Program was added.

The Health Department assumed responsibility for federally funded Special Children and Youth Projects.

Region 9 (Uvalde) was activated.

1974 State Health Department was again reorganized; sectional titles became bureaus and divisions.

Vector Control Division was given responsibility for licensing of youth camps.

The agency's name was changed to Texas Department of Health Resources (HB 2164—Texas Health Planning and Development Act).

Region 1 in Canyon and Region 6 in Temple were activated.

The Health Maintenance Organization division was formed (V.A.C. S. Insurance Code 20A.01-.34).

The Advisory Board of Athletic Trainers formed from what was formerly a professional licensing board.



The State Board of Examiners in Social Psychotherapy was established

1976 Public Health Regions 5 (Arlington) and 8 (Houston) were activated.

The Hypertension Program was made part of Chronic Disease Division and received \$484,149 in federal funds.

The Chronic Disease Multiphase Screening Program included breast and pelvic exams, pulmonary function tests, diabetes screening, and prostate screening.

The Cancer & Heart Program was established by Article 4418d, Vernon's Civil Statutes.

The "Tattle Tooth" dental program was piloted.

The Agency's name changed to Texas Department of Health

1977 Programs added included Nutrition Services, Vision Screening Services, and Disposal Site Control.

Nursing home inspection functions were transferred to TDH from the Department of Human Resources.

1978 The Comprehensive Service Program for SSI-eligible children was funded.

Other new programs created were Hemophilia Assistance Program, Improved Pregnancy Outcome Program, and Texas Genetic Diseases Control Network.

The Adult Denture Program was de-funded.



Cytology lab services were consolidated at San Antonio Chest Hospital under the Maternal and Child Health Division.

The Newborn Screening program expanded to include homocystinuria and galactosemia.

The Life Safety Code Division was created to coordinate architectural, engineering, and fire safety services provided to medical facilities.

1979 The East Texas Chest Hospital was no longer mentioned in the bi-annual report.

The Hazardous Products Program now included the Bedding Sanitation Program.

The Recreational Sanitation Branch was established as part of the General Sanitation Division. Its function was to inspect and license youth camps and public swimming pools.

The Fluoridation Program was initiated and funded by a Federal grant.

1981 Federal "block grant" funding mechanism was adopted as part of the Omnibus Budget Reconciliation Act (OBRA '81) and affected the Maternal and Child Health (Title V of the Social Security Act) and the Preventive Health and Health Services block grant.

The Public Health Education Division was changed to the Public Health Promotion Division.

Reprographics and Educational Services separated from Public Health Education.



New programs included the TDH Wellness Program, the Refugee Health Program, the Texas Veterans Agent Orange Assistance Program, and the Office of Grants and Contract Development.

The department wrote a grant for the Child Passenger Safety Program.

Chest Hospitals organizationally moved to Hospital Care Division.

The Bureau of Crippled Children's Services included the Hemophilia Assistance Program, the Epilepsy Program, the SSI Disabled Children's Program, the Children's Outreach Heart Program, and the Early Childhood Intervention Program.

The Volunteer Services Program was established as part of Long Term Care to build a community-based volunteer program.

The Pharmacy Division was established in response to Texas Pharmacy Act.

Licensing of Professional Counselors was initiated.

The Family Planning grant was added through federal funds from Title X of the Public Health Service Act.

The Rape Prevention and Crisis Services Program was added to the EMS Division.

The Migrant Labor Camp Assistance Program ended.

New regulatory functions included licensing of Dietitians,



	State Board of Examiners for Speech-Language Pathology and Audiology, and a training program for lay midwives.
1984	The MDCP program began as a model waiver program of Title XIX of the Social Security Act.
1985	New programs initiated were the School Spinal Screen Program, the Safe Riders Program (began following Federal grant), the Respiratory Care Practitioners Certification Program, licensing of Birthing Centers, and licensing of Abortion Facilities.
1987	Certification of Medical Radiologic Technologists was started.
1988	The WIC Farmers Market Program began.
1989	New regulatory programs included licensing of Special Care Facilities, licensing of Ambulatory Surgical Centers, and mandatory qualifications established to practice as a midwife.
1990	The Occupational Safety and Health Division was changed to Occupational Hygiene Division.
1991	Targeted case management for pregnant women & infants began.
	Licensing of Medical Physicists started.
1993	School-based health clinics were initiated through federal funds form Title V of the Social Security Act.
	Psychiatric hospital licensing was transferred from MHMR to TDH.



Licensing of End Stage Renal Disease facilities started.

1996 Maternal and Child Health Title V population-based

services grants were released to communities

Take Time for Kids population-based program began.

An abstinence program was initiated following federal

legislation as part of a Title V grant.

Orthotists and Prosthetics Licensing program was created.

TDH was given disciplinary authority related to midwives.

1998 ESPDT Case management was initiated.

## REFERENCES

History of Public Health in Texas, 1950 (Dr. Howard E. Smith)

History of Public Health in Texas, 1974 (Dr. Howard E. Smith)

Internal Assessment Interviews, March 2000.

Texas Department of Health Annual Reports, 1939-1974.



Texas Department	of Health Compre	ehensive Strate	gic and Operation	al Plan Fiscal Year	s 2001–2002

